



PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

Application or Docket Number

22	8/1/
	O all

CLAIMS AS FILED - PART I (Column 1) (Column 2)					· ·				OTHER THAN WALL ENTITY		
FC	P	NUM	IBER FILED	NUMBER	EXTRA		RATE	FEE	7	RATE	FEE
ВА	SIC FEE							345.00	OR		690.00
ТС	TAL CLAIMS		minus 2	0= *			X\$ 9=		OR	X\$18=	21116
INDEPENDENT CLAIMS minus 3 = *					X39=		1	X78=			
MU	MULTIPLE DEPENDENT CLAIM PRESENT								OR		180
* If	* If the difference in column 1 is less than zero, enter "0" in column 2						+130=		OR	+260=	200
					,O1011111		TOTAL		OR	TOTAL	1996
		Column 1	S AMENDED	(Column 2)	(Column 3)		SMALL	ENTITY	OR	OTHER SMALL	
ENT A		CLAIMS REMAINING AFTER AMENDMEN	à	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDMENT	Total	* 60	Minus	** 111	=		X\$ 9=		OR	X\$18=	
AME	Independent	* 2	Minus	*** 3	=		X39=		OR	X78=	
	FIRST PRESE	NIATION OF	MULTIPLE DEP	ENDENT CLAIM			+130=		OR	+260=	
						L	TOTAL			TOTAL	
		(Column 1	1)	(Column 2)	(Column 3)		ADDIT. FEE			ADDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMEN	G	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDM	Total	*	Minus	**	=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	=		X39=		OR	X78=	,
	FIRST PRESE	NTATION OF	MULTIPLE DEP	ENDENT CLAIM		 	400			000	
							+130=		OR	+260= TOTAL	
						<i>P</i>	ADDIT. FEE		OR	ADDIT. FEE	
 -		(Column 1)	(Column 2) HIGHEST	(Column 3)				. · 1 !	· · · · · · · · · · · · · · · · · · ·	
ENT C		REMAINING AFTER AMENDMEN		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	, ·	RATE	ADDI- TIONAL FEE
AMENDMEN	Total	*	Minus	**	=		X\$ 9=		OR	X\$18=	,
ME	Independent	*	Minus	***	=		X39=			X78=	
_	FIRST PRESE	NTATION OF	MULTIPLE DEP	ENDENT CLAIM		-	700 -		OR	7(70=	
* .	f the antry in colu	mn 1 is less the	in the entry in colum	nn 2 writa "0" in co	lumn 2		+130=		OR	+260=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											

This Form is for INTERNAL PTO USE ONLY It does NOT get mailed to the applicant.

NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

	Total Fee Calculation									
		Fee Cade	Tat⊒l # Claims	Number Etter X	Fcc	Fee	- Tarat			
	Busic Filing Fee	Sm./Lg 201/101			Sin. Entiry	Li Entiry	Total			
-	Total Claims >20	205/103	200.	233		~	· 690			
4	Independent Claums >3	202/102	20	24 ×		20	· . 21176			
	Multi Dep Claim Present	204/104	•			20	· 1813			
	Surcharge	205/105	•				des			
	English Translation	110			***************************************		130			
	Fous due upon filing the			,	•	•	2008			
	Total Filing Fees Due =	S _* ?	128.0							
[Less Filing Fees Submir	Ted - 5		•						
E	BALANCE DUE	= 5 /7 (≥8 . ∞							
0	frice of Initial Patent Ex	amination	·							
FC	DRM OIPE-RAM-01 (Rev. 1	2/97)	Ligur	c 7						